

THE UNIVERSITY OF THE WEST INDIES ST. AUGUSTINE

SCHOLARSHIP/BURSARY APPLICATION FORM

Please complete legibly and in duplicate. <u>Only registered FULL-TIME students</u>
OR <u>students going into FULL-TIME study in Year II will be considered for a Scholarship/Bursary.</u>

NB: IF YOU ARE THE HOLDER OF A RENEWABLE/CONTINUING AWARD, YOU ARE <u>NOT</u> REQUIRED TO SUBMIT ANOTHER APPLICATION.					
Section 1	STUDENT ID NO.:				
SURNAME:	OTHER NAMES:				
PRESENT FACULTY/CAMPUS & DEGREE PROGRA (Please indicate Minor if any)	AMME:				
PROCEEDING TO: YEAR I YEAR	II YEAR III YEAR IV				
PERMANENT ADDRESS:	MAILING ADDRESS:				
HOME/PERMANENT PHONE:	ARE YOU A STAFF DEPENDENT: YES NO				
CELL PHONE NO.:	DISABILITY:				
DATE OF BIRTH:	COUNTRY OF BIRTH:				
NATIONALITY:	MARITAL STATUS: SEX: MALE FEMALE				
CURRENT AWARD (IF ANY):	ANNUAL VALUE OF AWARD (IF APPLICABLE):				
OTHER FINANCIAL ASSISTANCE – LOAN	\$AMOUNT \$AMOUNT				
Section 2 Applicants applying for UWI Co-O On Extra Curricular Activities Students applying for this But	Curricular Bursaries & Other Bursaries requiring information rsary must have a minimum 'B' average in University Examinations. contributions during the academic year. The Dean of your Faculty AND/OR				
Signature of Dean of Faculty	Date				
Signature of Director, S.A.S.	Date				

Section 2(a)						
If you are applying for a Scholarship/Bursary, which requires you or your parent/s to be a member of a Credit Union, other Association (eg T&TUTA), kindly include the required information by ticking the relevant box:						
☐ T&TUTA : No(Please indicate Membership No.)	☐ REPUBLIC BANK - CAREER BUILDER ACCOUNT					
	☐ TATECO CREDIT UNION					
□ APETT	☐ TEACHERS CREDIT UNION					
☐ ENGINEERING STUDENTS' SOCIETY	□ WORKS CREDIT UNION					

Section 3

This Section to be completed ONLY by A' LEVEL/CAPE applicants entering UWI at the beginning of the Academic Year.

Academic Qualifications

Examining Body Cambridge/London/ CXC etc.	SUBJECTS TAKEN	ADVANCED LEVEL [✔]	CAPE [✔]	YEAR	GRADE

Sections 4 & 5

These Sections must be completed ONLY by students applying for a Bursary/Scholarship WITH A FINANCIAL NEED ELEMENT

Section 4 – Household Information

		Household of Parent	(8)/(Juardian	Household of Stu	dent/Spouse
1.	Number of persons in household:					
2.	Number and ages of dependent children:					
3.	Number of these persons in University:	No Parent	[]	Student	[]
		One Parent	[]	Spouse	[]
		Both Parents	[]		
		Others	[]	Others	[]
4.	Parent(s)/Guardian's current marital status:	Single	[]		
		Married	[]		
		Separated	[]		
		Divorced	[]		
		Widowed	[]		
5.	Is either Parent/Guardian, Spouse:	Mother []			Spouse []	
	[a] Retired?	Father []				
		Mother []			Spouse []	
	[b] Employed?	Father []				
		Mother []			Spouse []	
	[c] Unemployed?	Father []				
		Mother []			Spouse []	
	[d] Handicapped?	Father []				
		Mother []			Spouse []	
	[e] Deceased?	Father []				
		Mother []			Spouse []	
	[f] Living Abroad?	Father []				
6.	Occupation:	Mother			Student	
		Father			Spouse	

Applicants may state below any other information as evidence of Financial Need

Your application for a financial need Bursary <u>WILL NOT BE CONSIDERED</u> unless it is accompanied by the following documents:

- (1) Authorized job letter of person(s) supporting applicant OR Pension letter (from whom the Pension is paid) OR A letter from the provider of one's Financial Assistance.
- (2) Notarized statement of income and expenses {one copy only} (Certified by a Commissioner of Affidavits/Notary Public)

Additional Comments to support application for Bursary based wholly or partially on FINANCIAL NEED

Section 5

PROJECTED INCOME AND EXPENSES FOR ACADEMIC YEAR OF AWARD

(APPLICANTS ARE REQUIRED TO SUBMIT AN AUTHORIZED JOB LETTER AND A NOTARIZED STATEMENT OF INCOME AND EXPENSES)

(Please complete the relevant column)

		Parent(s)/Guardian \$		Applicant/Spouse
1. Family Income for the YEAR:	Mother	Ψ	Student	Ψ
	Father		Spouse	
	Other		Other	
	TOTAL		TOTAL	
	MORTGAGE			
2. Expenses for the YEAR :	RENT - (HOME)			
	RENT - (STUDENT)			
	TUITION FEE: (APPLICANT)			
	TELEPHONE			
	ELECTRICITY			
	WATER			
	GROCERIES (Home)			
	MARKET (Home)			
	GROCERIES (Applicant)			
	MARKET (Applicant)			
	TRAVELLING – (Applicant)			
	BOOKS (Applicant)			
	TOTAL			

I certify that the information provided in this Application for a Scholarship/Bursary is true and correct.

Signature of Applicant	Date

The Registry St. Augustine 24th February 2010 PB/vp